THE RETIREMENT SYSTEMS OF ALABAMA

INVITATION TO BID

For:

IBM FILENET ENTERPRISE CONTENT MANAGEMENT SOFTWARE & MAINTENANCE

Agency Contact:

Edward Davis (334) 517-7130

Invitation to Bid No.: 15-007

Mandatory Pre-bid Conference:

DATE: N/A

Bids Must be Received Before:

DATE: April 23, 2015 TIME: 4:30 PM

Bids Will be Publicly Opened

DATE: April 24, 2015 TIME: 10:00 AM

FAX NUMBER

| INFORMATION IN THIS SECTION SHOUL SIGNATURE AND NOTARIZATION. | TO BE COMPL D BE PROVIDED AS APPROPE | | DOR NSE MUST BE IN INK OR TYPED WITH ORIGINAL |
|---|---------------------------------------|---|--|
| 1) DELIVERY: CAN BE MADED | AYS AFTER RECEIPT OF ORD | ER. | |
| 2) TERMS:(DISCOUNTS OF PAYMENT). | WILL BE CONSIDERED IN THE | BID EVALUATION | AND WILL BE TAKEN WITHOUT REGARD TO DATE |
| 3) PRICES VALID FOR ACCEPTANCE W | THINDAYS. | | |
| 4) VENDOR'S QUOTATION REFERENCE | NUMBER, IF ANY: | (THIS NUME | BER WILL APPEAR ON PURCHASE ORDER) |
| 5) FEDERAL EMPLOYER ID. NO. (IF NO | FEIN, ENTER SSN) : | | |
| 6) E-MAIL ADDRESS: | | WEBSITE: | |
| | | | |
| RETURN INVITATION TO I | | | COURIER |
| RETIREMENT SYSTE P.O. BOX MONTGOMERY, ALA | 302150 | RETIREMENT SYSTEMS OF ALABAMA 201 S. UNION STREET, SUITE 574 MONTGOMERY, ALABAMA 36104-4369 | |
| | mong bidders in restrain | offered at the p | REQUIRED price quoted. I hereby affirm I have not been of competition by agreement to bid at a fixed |
| Sworn to and subscribed before me this | COMPANY NAM | | AUTHORIZED SIGNATURE (INK) |
| DAY OF, 20 | MAILING ADDRI | | TYPE / PRINT AUTHORIZED NAME |
| NOTARY PUBLIC | CITY, STATE, Z | IP | |

PHONE INCLUDING AREA CODE

BID RESPONSE INSTRUCTIONS

- READ ALL TERMS, CONDITIONS AND SPECIFICATIONS
- Label your bid response envelope with the BID NUMBER and OPENING DATE.
 Bids not identified may be rejected.
- Submit your bid on time. **ALL LATE BIDS WILL BE REJECTED.** The Retirement Systems of Alabama assumes no responsibility for bid responses that are late due to the U.S. Postal Service, private courier service, or any other reason.
- Bid responses must be signed and notarized. Signatures must be original, handwritten.
- Bid pricing must be submitted on the attached **Price Sheet** without modification and must include all requested information.
- Any errors or corrections to a bid response must be initialed.
- Delivery date may be considered a factor in determining an award.
- Any questions or clarifications concerning this bid should be directed to Edward Davis at (334) 517-7130. Bidders should only consider written information provided by RSA Office Services when completing this bid.
- **STATE LAWS:** All bidders are responsible for compliance with all laws and Executive Orders and opinions of the Attorney General of Alabama before doing business with a State Agency.
- The Retirement Systems of Alabama is exempt from paying Federal Excise Tax, state and local sales tax.

Retirement Systems of Alabama ITB 15-007 IBM FILENET ENTERPRISE CONTENT MANAGEMENT SOFTWARE & MAINTENANCE

PURPOSE

The purpose of this Invitation to Bid is to select a qualified vendor from which to purchase IBM FILENET ENTERPRISE CONTENT MANAGEMENT Software and Maintenance for the Retirement Systems of Alabama.

BID OPENING

Bids must be received no later than **4:30 PM April 23, 2015**. Bids will be publicly opened April 24, 2015 at 10:00 AM in Room 521 of the RSA Systems Building located at 201 South Union Street, Montgomery, Alabama, 36104.

BID PRICING

Bidders are requested to enter their bid price for software and maintenance using the attached Price Sheet. All bid pricing shall be deemed to include all costs associated with providing the specified product. No additional charges shall be allowed.

BID EVALUATION

The bid will be awarded on an "all or none" basis to the lowest responsible bidder meeting all specifications, terms and conditions. RSA reserves the right to reject any or all bids and to waive any technical errors or discrepancies if, in their judgment, it would be in the best interest of RSA to waive such errors or discrepancies.

It is not a requirement to be a registered bidder with the State of Alabama to qualify to bid.

INTENT TO AWARD

The Retirement Systems of Alabama will issue an "Intent to Award" before a final award is made. The "Intent to Award" will continue for a period of five calendar days, after which a final award will be made. Upon final award, all rights to protest are forfeited. A detailed explanation of this process may be reviewed in the Alabama Administrative Code – Chapter 355-4-1 (14).

E-VERIFY REQUIREMENTS

In accordance with Act 2012-491, as a condition for the award of any contract, grant, or incentive by the state, any political subdivision thereof, or a state-funded entity to a business entity or employer that employs one or more employees within the State of Alabama, the business entity or employer shall provide documentation establishing that the business entity or employer is enrolled in the E-Verify Program.

The successful bidder will be required to submit a completed and notarized Certificate of Compliance (copy attached) as well a copy of their entire E-Verify Memorandum of Understanding (MOU) issued by the U.S. Department of Homeland Security.

RESPONSIVE BIDDERS

Awarded vendor must be authorized by IBM to resell IBM Enterprise Content Management solutions to any state or local government agency within the State of Alabama. A current, signed letter of authorization from IBM must be provided with your bid response.

Include with your bid response complete details of your company's Return Merchandise Policy, including, but not limited to, amount of any restocking fee required, procedures, limitations, contact person and phone number.

Bidders must complete and return with their bid package the **Vendor Tax Certification Statement** required by ACT 2006-557 (copy attached).

Bidders must complete and return with their bid package the **Vendor Disclosure Statement** as required by Act 2001-955 (copy attached).

DELIVERY

Delivery terms are F.O.B. Destination, 201 South Union Street, Montgomery, Alabama 36104. All shipments must include a packing slip or invoice referencing the Retirement Systems of Alabama's purchase order number.

DELIVERY TIME

Maximum delivery time for the software will not exceed **14 calendar days** after receipt of Purchase Order. All components necessary to meet the specifications must be delivered within this 14 day time frame. RSA accepts deliveries Monday – Friday 8:00 AM to 5:00 PM, excluding State of Alabama holidays.

WARRANTY AND SUPPORT

The IBM Enterprise Content Management software must be warranted by the manufacturer for a minimum of one year. The Warranty period commences the date the software is received by the Retirement Systems of Alabama. Extended warranty options should be made available upon request.

PAYMENT OF INVOICES

Payment terms are Net 30.

PRICE SHEET ITB 15-007 IBM FILENET ENTERPRISE CONTENT MANAGEMENT SOFTWARE & MAINTENANCE

| | Quantity/ | | |
|---|-----------|------------|------------------------|
| | Unit | Unit Price | Extended Amount |
| IBM Case Foundation Authorized User Value Unit | | | |
| License + SW Subscription & Support | | | |
| P.N. D0479LL | 200 | \$ | \$ |
| IBM Case Foundation Authorized User Value Unit | | | |
| Annual SW Subscription & Support Renewal 2-years | | | |
| P.N. E04Y8LL | 200 | \$ | \$ |
| IBM Datacap Authorized User Value Unit License + SW | | | |
| Subscription & Support | | | |
| P.N. D0H4PLL | 15 | \$ | \$ |
| IBM Datacap Authorized User Value Unit Annual SW | | | |
| Subscription & Support Renewal 2-years | | | |
| P.N. E0AXTLL | 15 | \$ | \$ |
| IBM Datacap Enterprise Edition Add-On Authorized | | | |
| User Value Unit License + SW Subscription & Support – | | | |
| P.N. D0T5ELL | 15 | \$ | \$ |
| IBM Datacap Taskmaster Enterprise Edition Authorized | | | |
| User Value Unit Annual SW Subscription & Support | | | |
| Renewal – 2-years P.N. E0EHILL | 15 | \$ | \$ |
| IBM FileNet Content Manager Eligible Participant | | | |
| Resource Value Unit License + SW Subscription & | | | |
| Support – P.N. D11JVLL | 75,000 | \$ | \$ |
| IBM FileNet Content Manager Eligible Participant | | | |
| Resource Value Unit Annual SW Subscription & | | | |
| Support Renewal – 2-Years P.N. E0IEZLL | 75,000 | \$ | \$ |

| Total Bid Price | \$ |
|-----------------|----|
|-----------------|----|

Retirement Systems of Alabama

VENDOR TAX CERTIFICATION

(Required by Act 2006-557)

Alabama law (Section 41-4-116, Code of Alabama 1975) provides that every bid submitted and contract executed shall contain a certification that the vendor, contractor, and all of its affiliates that make sales for delivery into Alabama or leases for use in Alabama are registered, collecting, and remitting Alabama state and local sales, use, and/or lease tax on all taxable sales and leases into Alabama. By submitting this bid, the bidder is hereby certifying that they are in full compliance with Act No. 2006-557, they are not barred from bidding or entering into a contract pursuant to 41-4-116, and acknowledges that the awarding authority may declare the contract void if the certification is false.

| I hereby attest that | is appropriately registered to collect | | |
|---|--|--|--|
| (company name) | | | |
| and remit sales, use and lease tax on all its sales | and leases into the State of Alabama and is not | | |
| barred from bidding for or entering into a contra | act under ACT 2006-557. I hereby acknowledge | | |
| that the RSA may declare any contract awarded | from this ITB void if this certification is false. | | |
| | | | |
| | | | |
| | Company Name | | |
| | | | |
| | | | |
| | Authorized Signature | | |

State of Alabama Disclosure Statement

(Required by Act 2001-955)

| ENTITY COMPLETING FORM: | | |
|---|--|--|
| ADDRESS: | | - |
| CITY, STATE, ZIP | | TELEPHONE NUMBER |
| STATE AGENCY/DEPARTMENT THAT Retirement Systems of Alabama | WILL RECEIVE GOODS, SERVICE | ES, OR IS RESPONSIBLE FOR GRANT AWARD: |
| ADDRESS:201 <u>S. Union Street, Montgomery</u> CITY, STATE, ZIP | v, AL 36104 | 334-517-7000 TELEPHONE NUMBER: |
| This form is provided with: | | |
| Contract Proposal Request | for Proposal Invitation to | Bid Grant Proposal |
| Have you or any of your partners, goods to any State Agency/Departm | | iness units previously performed work or provided al year? |
| Yes No | | |
| If yes, identify below the State Ag services previously provided, and the | | ved the goods or services, the type(s) of goods or ovision of such goods or services. |
| State Agency/Department | Type of Goods/Serv | vices Amount Received |
| from any State Agency/Department Yes No If yes, identify the State Agency/I | in the current or last fiscal ye | ess units previously applied and received any grants ear? |
| amount of the grant. | Day Court A soul 1 | A second of Count |
| State Agency/Department | Date Grant Awarded | Amount of Grant |
| immediate family, or any of your | employees have a family rela ransaction. Identify the S | public employees with whom you, members of your ationship and who may directly personally benefit tate Department/Agency for which the public essary.) |
| Name of Public Official/Employee | Address | State Department/Agency |
| | | |

2. List below the name(s) and address(es) of all family members of public officials/public employees with whom you, members of your immediate family, or any of your employees have a family relationship and who may directly

personally benefit financially from the proposed transaction. Identify the public officials/public employees and State Department/Agency for which the public officials/public employees work. (Attach additional sheets if necessary.)

| Name of | | Name of Public Official/ | State Department/ | |
|-------------------------|---|--|--------------------------------------|--|
| Family member | Address | Public Employee | Agency Where Employed | |
| | | | | |
| gained by the public | officials, public employ | d/or two above, describe in detail belo yees, and/or their family members as t ant proposal. (Attach additional sheets | he result of the contract, proposal, | |
| family members of th | ne public official or pub | rial benefits to be gained by any public employee as the result of the contradditional sheets if necessary.) | | |
| | e(s) and address(es) o proposal, invitation to | f all paid consultants and/or lobbyist | ts utilized to obtain the contract, | |
| Name of Paid Consul | ltant/Lobbyist | Address | | |
| true and correct to the | he best of my knowledg | l penalty of perjury that all statement ge. I further understand that a civil po \$10,000.00, is applied for knowingly p | enalty of ten percent (10%) of the | |
| Signature | | Date | | |
| Notary's Signature | | Date | Date Notary Expires | |

Act 2001-955 requires the disclosure statement to be completed and filed with all proposals, bids, contracts, or grant proposals to the State of Alabama in excess of \$5,000.

| State of | |
|---|--|
| County of | |
| CERTIFICATE OF COMPLIANCE WITH THE BEASON-HAMMON (ACT 2011-535, as amended) | |
| DATE: | |
| RE: Contract/Grant/Incentive (describe by number or subject): | by and between |
| | (Contractor/Grantee) and (State Agency, Department of Public Entity) |
| | (Suite inguier), 2 opin ment of 1 unite 21mily |
| The undersigned herby certifies to the State of Alabama as follows: | |
| The undersigned holds the position of provide representations set out in this Certificate as the official and binc BEASON-HAMMON ALABAMA TAXPAYER AND CITIZEN PR amended by Act 2012-491) which is described herein as "the Act". Using the following definitions from Section 3 of the Act, select and in the Act. | ting act of that entity, and has knowledge of the provisions of THE OTECTION ACT (ACT 2011-535 of the Alabama Legislature, as |
| business structure. | |
| enterprise, profession, or occupation for gain, benefit, advantage, shall include, but not be limited to the following: a. Self-employed individuals, business entities filing articles companies, foreign corporations, foreign limited partnership in this state, business trusts, and any business entity that regi b. Any business entity that possesses a business license, p authorization issued by the state, any business entity that business entity that is operating unlawfully without a busines EMPLOYER: Any person, firm, corporation, partnership, joint person having control or custody of any employment, place of | remit, certificate, approval, registration, charter, or similar form of its exempt by law from obtaining such a business license and any its license. Stock association, agent, manager, representative, foreman, or other employment, or of any employee, including any person or entity ling a public employer. This term shall not include the occupant of a estic labor within the household. Stare defined in Section 3 of the Act. The Contractor/Grantee must adding issued and electronically signed by the U.S. Department of the E-Verify program to this Certificate of Compliance. The contractor of the Act. The Contractor of the Act. |
| | |
| Certified thisday of20 | |
| | Name of Contractor/Grantee/Recipient |
| | By: |
| | Its: |
| The above Certification was signed in my presence by the person whose name | e appears above, on |
| Thisday of20 | |
| | WITNESS |

Printed Name of Witness